



(Interim Form)
COMMITTEE
CAMPAIGN STATEMENT

(GOVERNMENT CODE SECTION 84200-84214)

Statement covers period from 2/17/76 through 4/29/76

MAY 4, 1976

Pinkerton for Council Committee

746922

NAME OF COMMITTEE

I.D. NUMBER

1321 North Calif. St. Lodi California

95240

209 363-4695

ADDRESS OF COMMITTEE (NO. AND STREET) (CITY)

(STATE)

(ZIP CODE)

(AREA CODE) (PHONE NO.)

Esther F. Lund

NAME OF TREASURER

2713 Howard St.

Lodi California

95240

209 363-4695

RESIDENTIAL ADDRESS OF TREASURER (NO. & STREET)

(CITY)

(STATE)

(ZIP CODE)

(AREA CODE) (PHONE NO.)

3321 North Calif. St.

Lodi California

95240

209 363-4695

BUSINESS ADDRESS OF TREASURER (NO. & STREET)

(CITY)

(STATE)

(ZIP CODE)

(AREA CODE) (PHONE NO.)

☒ LINE 1 ☐ LINE 2 ☐ LINE 3 ☐ OTHER

CHECK APPLICABLE BOX FOR MAILING ADDRESS (If other, list No. and Street for P.O. Box, City, State and Zip Code)

General Municipal

March 2, 1976

10

A

TYPE OF ELECTION (PRIMARY GENERAL SPECIAL)

DATE OF ELECTION (MONTH DAY YEAR)

TOTAL PAGES

OFFICIAL USE ONLY

ALLOCATION OF EXPENDITURES BY CANDIDATES AND MEASURES

(Allocate the totals of Schedules E and F by Candidates and Measures; Amounts may be rounded off to whole dollars)

OFFICIAL USE ONLY	NAME OF CANDIDATE AND OFFICE; NAME OF BALLOT MEASURE AND BALLOT NUMBER OR LETTER	CHECK ONE	AMOUNT OF EXPENDITURES THIS PERIOD	CUMULATIVE TO DATE
	James W. Pinkerton, Jr.	<input checked="" type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE	\$1,420.53	\$1300.53
		<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE		
		<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE		
		<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE		
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		<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE		
		<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE		

Attach additional information on appropriately labeled continuation sheets.

VERIFICATION

C I declare under penalty of perjury that to the best of my knowledge, this statement and its schedules are true, correct and complete and that I have used all reasonable diligence in their preparation.

Executed on 5/3/76

(DATE)

at Lodi, Calif.

(CITY AND STATE)

by Esther F. Lund

(SIGNATURE OF TREASURER)

A candidate who controls a committee must also verify the campaign statement.

E I declare under penalty of perjury that to the best of my knowledge this statement and its schedules are true, correct and complete and the treasurer of this committee has used all reasonable diligence in the preparation of this statement and its schedules.

Executed on 5/3/76

(DATE)

at Lodi, Calif.

(CITY AND STATE)

by [Signature]

(SIGNATURE OF CANDIDATE)

SUMMARY PAGE

Name Pinkerton for Council Committee

I.D. Number 745928
If Committee

COLUMN A Cumulative total from previous period	COLUMN B This period	COLUMN C Cumulative to date
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RECEIPTS

1. Monetary contributions (Line 5, Part 3 of Schedule A)	\$ 795.00	\$ 1,005.53	\$ 1,800.53 (Column A + Column B)
2. Unpaid loans (Line 9, Part 3 of Schedule B)	-0- (Total at beginning of period)	-0- (Net change for period)	-0- (Total at end of period)
3. Miscellaneous receipts (attach explanation)	-0-	-0-	-0- (Column A + Column B)
4. Total monetary contributions, Net cash receipts (Lines 1+2+3)	\$ 795.00	\$ 1,005.53	\$ 1,800.53 (Column A + Column B)
5. Non-monetary contributions (Line 3 of Schedule C)	-0-	-0-	-0- (Column A + Column B)
6. Pledges (Line 7 of Schedule D)	-0- (Total at beginning of period)	-0- (Net change for period)	-0- (Total at end of period)
7. Total receipts (Lines 4+5+6)	\$ 795.00	\$ 1,005.53	\$ 1,800.53 (Column A + Column B)

EXPENDITURES

8. Payments (Line 6, Part 3 of Schedule E)	\$ 380.00	\$ 1,420.53	\$ 1,800.53 (Column A + Column B)
9. Accrued expenses (unpaid bills) (Line 5 of Schedule F)	685.73 (Total at beginning of period)	734.80 (Net change for period)	1,420.53 (Total at end of period)
10. Total expenditures (Lines 8+9)	\$ 380.00	\$ 1,420.53	\$ 1,800.53 (Column A + Column B)

STATEMENT OF CHANGES IN FINANCIAL CONDITION

11. Cash on hand at the beginning of this period	\$ 415.00
12. Cash receipts this period (Line 4, column B)	1,005.53
13. Cash payments this period (Line 8, column B)	1,420.53
14. Cash on hand at closing date (Lines 11+12-13)	-0-
15. Liabilities (Line 2, column C + Line 9, column C)	-0-
16. Surplus (If Line 14 is greater than Line 15, subtract Line 15 from Line 14)	\$ -0-
17. Deficit (If Line 15 is greater than Line 14, subtract Line 14 from Line 15)	\$ ()

746923

SCHEDULE A, FORM 420 or 430
MONETARY CONTRIBUTIONS

PART 1 - RECEIVED FROM COMMITTEES: (See information manual for directions and examples)

4. ADDITIONAL INFORMATION ON APPROPRIATELY LABELED CONTINUATION SHEETS

SUBTOTAL (Carry with additional Subtotals to line 1, part 3, page 4) \$

SCHEDULE A, FORM 420 or 430

(continued)

PART 2 - RECEIVED FROM OTHERS: (See information manual for directions and examples)

DATE	FULL NAME AND ADDRESS (Street, City, State) OF CONTRIBUTOR*	OCCUPATION	EMPLOYER (IF CONTRIBUTOR IS SELF-EMPLOYED LIST STREET ADDRESS & CITY OF BUSINESS)	AMOUNT RECEIVED	CUMULATIVE AMOUNT
2/17/76	Vickie Van Steenberge 1029 So. School St. Lodi	self-employed	Lodi Iron Works 820 So. Sacramento Lodi	(check) \$100.00	\$100.00
2/18/76	Clarence O. Turner 601 Eureka St. Lodi	Manager & Loan Officer	Creditway of America 531 West Lodi Ave. Lodi	(check) \$ 25.00	25.00
2/19/76	John Ferraiolo 2426 Tejon St. Lodi	self-employed	House of Hardtops 1 North Cherokee Ln. Lodi	(check) \$100.00	100.00
2/19/76	Robert F. Hunnell 115 North Orange Lodi	self-employed	Medical Arts Pharmacy 645 So. Fairmont Lodi	(check) 50.00	50.00
2/19/76	Vern Hoffman 19600 N. Bruella Rd. Acampo	farmer	same as residence	(cash) 10.00	10.00
2/ /76	Howard Babcock 9 Chestnut St. Lodi	self-employed	Howard's Catering 235 Lakewood Mall Lodi	(check) 25.00	25.00
2/23/76	Vinal E. Benson 1503 Elmwood Dr. Lodi	self-employed	End-Kian Printing N. Sacramento & Louie Lodi	(check) 25.00	25.00
2/23/76	Joe Newfield 703 West Elm Lodi	self-employed	M. Newfield's & Sons 10 So. School Lodi	(check) 25.00	25.00
2/24/76	Dick Wilcox 1077 So. Orange Lodi	bulk oil distributor	Standard Oil of Calif 680 East Lockeford Lodi	(cash) 20.00	20.00
2/23/76	Ivern Baffoni 540 Kensington Lodi	Clothier	Squire's 100 West Pine Lodi	(cash) 49.00	49.00
SUBTOTAL (Carry with additional Subtotals to line 3, part 3)				\$ 429.00	

* If additional information on appropriately labeled continuation sheets

* If the contribution was made by an intermediary provide the information for both the intermediary and the principal contributor.

PART 3 - SUMMARY OF MONETARY CONTRIBUTIONS (See information manual for directions and examples)

1. RECEIVED FROM COMMITTEES THIS PERIOD (Part 1) Include all Subtotals \$ _____
2. RECEIVED FROM COMMITTEES UNDER \$50 THIS PERIOD (Not Itemized) _____
3. RECEIVED FROM OTHERS THIS PERIOD (Part 2) Include all Subtotals _____
4. RECEIVED FROM OTHERS UNDER \$50 THIS PERIOD (Not Itemized) _____
5. TOTAL MONETARY CONTRIBUTIONS THIS PERIOD (line 1 + 2 + 3 + 4, Enter this total on Line 1, Column B of Summary Page) \$ _____

SCHEDULE A, FORM 420 or 430

(Amounts may be rounded off to whole dollars)

[illegible]

SCHEDULE A, FORM 420 or 430
(continued)

PART 2 - RECEIVED FROM OTHERS: (See information manual for directions and examples)

[illegible]

For additional information on appropriately labeled continuation sheets

SUBTOTAL (Carry with additional Subtotals to line 3, part 3) \$

576.53

* If the contribution was made by an intermediary provide the information for both the intermediary and the principal contributor.

PART 3 - SUMMARY OF MONETARY CONTRIBUTIONS (See information manual for directions and examples)

- | | |
|---|-------------|
| 1. RECEIVED FROM COMMITTEES THIS PERIOD (Part 1) Include all Subtotals | \$ -0- |
| 2. RECEIVED FROM COMMITTEES UNDER \$50 THIS PERIOD (Not Itemized) | -0- |
| 3. RECEIVED FROM OTHERS THIS PERIOD (Part 2) Include all Subtotals | 1,005.53 |
| 4. RECEIVED FROM OTHERS UNDER \$50 THIS PERIOD (Not Itemized) | -0- |
| 5. TOTAL MONETARY CONTRIBUTIONS THIS PERIOD (Line 1 + 2 + 3 + 4,
Enter this total on Line 1, Column B of Summary Page) | \$ 1,005.53 |

(Interim Form)
SCHEDULE B, FORM 420 or 430
LOANS

(Amounts may be rounded off to whole dollars)

PART 1 - LOANS RECEIVED: (see information manual for directions and examples)

DATE	FULL NAME AND ADDRESS OF LENDER AND ANY GUARANTORS OR COSIGNERS	OCCUPATION	EMPLOYER (If self-employed list street address and city of business.)	Interest Rate	AMOUNT OF LOAN	CUMULATIVE AMOUNT
	none					
Attach additional information on appropriately labeled continuation sheets.					SUBTOTAL \$	none

PART 2 - LOANS REPAYED, FORGIVEN, OR PAID BY A THIRD PARTY:
 (see information manual for directions and examples)

DATE	FULL NAME AND ADDRESS	(a) AMOUNT REPAYED	(b) AMOUNT FORGIVEN (Enter on Sched. A)	(c) AMOUNT PAID BY A THIRD PARTY (Enter on Sched. A)	(d) UNPAID BALANCE
	none				
Attach additional information on appropriately labeled continuation sheets.		SUBTOTAL \$	none	none	none

PART 3 - SUMMARY

- LOANS OF \$50 OR MORE THIS PERIOD (Part 1) Include all Subtotals
- LOANS UNDER \$50 THIS PERIOD (Not Itemized)
- TOTAL LOANS RECEIVED (Line 1 + 2)
- LOANS REPAYED OF \$50 OR MORE THIS PERIOD (Part 2, Column a) Include all Subtotals
- LOANS FORGIVEN OF \$50 OR MORE THIS PERIOD (Part 2, Column b) Include all Subtotals
- LOANS PAID BY A THIRD PARTY OF \$50 OR MORE THIS PERIOD (Part 2, Column c) Include all Subtotals
- LOANS REPAYED, FORGIVEN, OR PAID BY A THIRD PARTY UNDER \$50 THIS PERIOD (Not Itemized)
- TOTAL LOANS REPAYED, FORGIVEN OR PAID BY A THIRD PARTY THIS PERIOD (Line 4 + 5 + 6 + 7)
- NET CHANGE THIS PERIOD (Line 3-8, Enter this total on line 2, Column B of Summary Page)

\$ -0-
 -0-
 \$ -0-
 \$ -0-
 -0-
 -0-
 \$ -0-
 \$ -0-

NAME Pinckerton for Young Committee

I.D. NO.

(If Committee)

743928

(Interim Form)

SCHEDULE C, FORM 420 or 430
NON-MONETARY CONTRIBUTIONS

(Amounts may be rounded off to whole dollars)

See information manual for directions and examples

DATE	FULL NAME AND ADDRESS AND I.D. NUMBER (If Committee)	OCCUPATION	EMPLOYER*	DESCRIPTION OF CONSIDERATION	FAIR MARKET VALUE RECEIVED	CUMULATIVE AMOUNT
	none					
SUBTOTAL \$					none	

Attach additional information on appropriately labeled continuation sheets

* If contributor is self-employed list street address and city of business

SUMMARY

1. NON-MONETARY CONTRIBUTIONS OF \$50 OR MORE THIS PERIOD (Include all Subtotals) \$ - 0 -
2. NON-MONETARY CONTRIBUTIONS UNDER \$50 THIS PERIOD (Not Itemized) \$ - 0 -
3. TOTAL NON-MONETARY CONTRIBUTIONS THIS PERIOD (Line 1 + 2, Enter on Line 5, Column B of Summary Page) \$ None

ID NUMBER (if committed) 746928

(Amounts may be rounded off to whole dollars)

(a)

(b)

(c)

DATE	FULL NAME AND ADDRESS AND I.D. NUMBER (if consent free)	OCCUPATION	EMPLOYER*	AMOUNT PLEGGED THIS PERIOD	AMOUNT PAID (Enter on Sched. A)	CUMULATIVE PLEDGE UNPAID
	None					
SUBTOTAL \$				-0-	-0-	-0-

Attach additional information on appropriately labeled continuation sheets

* If contributor is self-employed list street address and city of business

1. PLEDGES OF \$50 OR MORE THIS PERIOD (Column a) Include all Subtotals
2. PLEDGES UNDER \$50 THIS PERIOD (Not Itemized)
3. TOTAL PLEDGES RECEIVED (Line 1 + 2)
4. PLEDGES OF \$50 OR MORE PAID THIS PERIOD (Column b) Include all Subtotals
5. PLEDGES UNDER \$50 PAID THIS PERIOD (Not Itemized)
6. TOTAL PLEDGES PAID (Line 4 + 5)
7. NET CHANGE THIS PERIOD (Line 3 - 6, Enter this total on line 6, Column B of Summary Page)

\$ -0-
 \$ -0-
 \$ -0-
 \$ -0-
 \$ -0-
 \$ -0-
 \$ -0-

I.D. NUM-

(11 Committee)

746928

SCHEDULE E, FORM 420 or 430

PAYMENTS

(Amounts may be rounded off to whole dollars)

PART 1 - MADE TO COMMITTEES: (See information manual for directions and examples)

[illegible]

Attach additional information on appropriately labeled continuation sheets

SUBTOTAL (Carry with additional subtotals to Line 1, part 3, page 9) \$

none

SCHEDULE E, FORM 420 or 430
(continued)

P T 2 - MADE TO OTHERS: (See information manual for directions and examples)

[illegible]

Attach additional information on appropriately labeled continuation sheets

SUBTOTAL (Carry with additional subtotals to Line 3, part 3) \$ 1,420.53

⁴ If the person providing the goods or services was different than the payee, list each person's name and address.

BULK RATE NO. _____

Enter your bulk rate and/or postage meter number used in campaign mass mailings. In addition a copy of each mass mailing should be sent to the Fair Political Practices Commission.

POSTAGE METER NO. _____

PART 3 - SUMMARY OF PAYMENTS (See information manual for directions and examples)

- | | | |
|---|----|-----------------|
| 1. MADE TO COMMITTEES THIS PERIOD (Part 1) Include all Subtotals | \$ | <u>-0-</u> |
| 2. MADE TO COMMITTEES UNDER \$50 THIS PERIOD (Not Itemized) | | <u>-0-</u> |
| 3. MADE TO OTHERS THIS PERIOD (Part 2) Include all Subtotals | | <u>1,420.53</u> |
| 4. MADE TO OTHERS UNDER \$50 THIS PERIOD (Not Itemized) | | <u>-0-</u> |
| 5. TOTAL ACCRUED EXPENSES PAID THIS PERIOD (Schedule F, Line 4) | | <u>1,420.53</u> |
| 6. TOTAL PAYMENTS THIS PERIOD (Lines 1 + 2 + 3 + 4 + 5, Enter this total on line 8, Column B of Summary Page) | \$ | <u>1,420.53</u> |

(Interim Form)
SCHEDULE F, FORM 420 or 430
ACCRUED EXPENSES (Unpaid Bills)
 (Amounts may be rounded off to whole dollars)

See Information manual for directions and examples

[illegible]

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$

734.80

¹ If the accrued expense is owed to a committee, list the committee's name and I.D. number (or the full name and address of the treasurer). If the person providing the goods or services was different from the payee, list each person's full name, street address, city and state.

SUMMARY

1. ACCRUED EXPENSES OF \$50 OR MORE THIS PERIOD. Include all Subtotals
2. ACCRUED EXPENSES OF UNDER \$50 THIS PERIOD. (Not Itemized)
3. TOTAL ACCRUED EXPENSES INCURRED THIS PERIOD (Line 1 + 2)
4. ACCRUED EXPENSES PAID THIS PERIOD (Not Itemized, Enter on Line 5, Part 3, Schedule E)
5. NET CHANGE THIS PERIOD (Line 3-4, Enter on Line 9, Column 9 of the Summary Page,
This may be a negative amount)

~~\$ 734.00

\$ 734.80

\$ 1,420.53

\$ 635.83~~